

216014655  
91717

State of Nebraska  
Investigator's Motor Vehicle Accident Report

Sheet 1 of 2

2	Total Number of Vehicles	Local No./ District 08	Agency Case No. B6-030452	HIT & RUN? <input type="radio"/> YES <input checked="" type="radio"/> NO	INVESTIGATION MADE AT SCENE? <input checked="" type="radio"/> YES <input type="radio"/> NO	L 1
A/1 01	DATE OF ACCIDENT	M M / D D / Y Y Y Y S M T W T H F S 04/11/2016		TIME OF ACCIDENT 1145	STATE USE ONLY	
A/2	PLACE OF ACCIDENT	COUNTY Lancaster	CITY Lincoln	POLICE NOTIFIED 1149	Amended	
B 50	ROAD ON WHICH ACCIDENT OCCURRED	STREET/ HIGHWAY NO. N 60th		PRIVATE PROPERTY? <input type="radio"/> YES <input checked="" type="radio"/> NO	04/12/2016	
C 1	DISTANCE FROM MILEPOST	FEET	N S E W OF MILEPOST	HIGHWAY NO.	LATITUDE	
D 1	IF AT INTERSECTION			IF NOT AT INTERSECTION		
	NAME OF INTERSECTING ROADWAY			OF NEAREST STREET, BRIDGE, RAILROAD CROSSING		
V1/M 03	Baldwin Ave.					
V2/M 10	IF ACCIDENT WAS OUTSIDE CITY LIMITS, INDICATE DISTANCE FROM NEAREST TOWN					
E 2	R. WORK ZONE CODES	R1 R2 R3 R4	S. PEDESTRIAN CLASSIFICATION CODES	S1 S2 S3 S4 S5-a S5-b S6-a S6-b	DOES ACCIDENT INVOLVE DAMAGE TO STATE DEPT. OF ROADS' PROPERTY? <input type="radio"/> YES <input checked="" type="radio"/> NO	
F 1	VEHICLE NO. 1					
V1/N 5	DRIVER LICENSE NO.	H13725100		STATE (Of License)	NE	SEX <input type="radio"/> FEMALE <input checked="" type="radio"/> MALE
V2/N 1	DRIVER	EMILIO L HASTINGS		PHONE	LOCAL NO.	
G 2	DRIVER ADDRESS	CITY, STATE, ZIP		DATE OF BIRTH (MM / DD / YYYY)	03/13/1998	
H 5	OWNER	JOVINA M HASTINGS		PHONE	402-499-1622	
V1/O 3	OWNER ADDRESS	CITY, STATE, ZIP		CITATION <input checked="" type="radio"/> YES <input type="radio"/> NO	CITATION NO. LB509879	
V2/O 2	LICENSE PLATE	PA NO. 74C109	YEAR (Plate Expires)	2017	STATE (Of Plate)	NE
V1/P 1	VEHICLE	1998	MAKE Ford	MODEL WWG	BODY STYLE Mini van	COLOR white
V2/P 1	VEHICLE ID NO. (VIN)	2FMDA5143WBB41645		ESTIMATED DAMAGE <input checked="" type="radio"/> TOALED \$		
V1/Q 1	TOWED TO		TOWED BY		INSURANCE COMPANY	
V2/Q 3	Capital towing		Capital Towing		General Assurance	
I 1	VEHICLE NO. 2					
V1/P 1	DRIVER LICENSE NO.	H13770699		STATE (Of License)	NE	SEX <input type="radio"/> FEMALE <input checked="" type="radio"/> MALE
V2/P 1	DRIVER	ALEX L DAVIS		PHONE	LOCAL NO.	
V1/Q 1	DRIVER ADDRESS	CITY, STATE, ZIP		DATE OF BIRTH (MM / DD / YYYY)	07/02/1999	
V2/Q 3	OWNER	Alex L Davis		PHONE	402-320-2053	
V1/R 01	OWNER ADDRESS	CITY, STATE, ZIP		CITATION <input checked="" type="radio"/> YES <input type="radio"/> NO	CITATION NO. LB509879	
V2/R 02	LICENSE PLATE	NO. none	YEAR (Plate Expires)		STATE (Of Plate)	
V1/S 1	VEHICLE	1999	MAKE Mercedes - Be	MODEL CLK430	BODY STYLE 2 door Sedan	COLOR silver / chrome
V2/S 3	VEHICLE ID NO. (VIN)	WDBLJ70G1XF108312		ESTIMATED DAMAGE <input type="radio"/> TOALED \$ 3000		
V1/T 02	TOWED TO		TOWED BY		INSURANCE COMPANY	
V2/T 02					Progressive Northern	
Complete this section for all injured persons (Complete a continuation report, if more than three were injured)				DATE OF BIRTH (MM / DD / YYYY)	1 Seat Position	2 Eject
VEH. #	NAME	ADDRESS			3 Body Region	4 Injury Sev.
1	Devin J Lobato	266 W Furnace, Lincoln, NE 68521		06/01/2000	5 Trans.	SEX M F
	LOCAL NO.	MEDICAL FACILITY NAME		EMS SERVICE NAME	EMS RUN REPORT NO.	
VEH. #	NAME	ADDRESS				
	LOCAL NO.	MEDICAL FACILITY NAME		EMS SERVICE NAME	EMS RUN REPORT NO.	
VEH. #	NAME	ADDRESS				
	LOCAL NO.	MEDICAL FACILITY NAME		EMS SERVICE NAME	EMS RUN REPORT NO.	

**THE FOLLOWING INFORMATION IS REQUIRED FOR ALL ACCIDENTS**

INDICATE BY DIAGRAM WHAT HAPPENED

AGENCY CASE NO.  
**B6-030452**

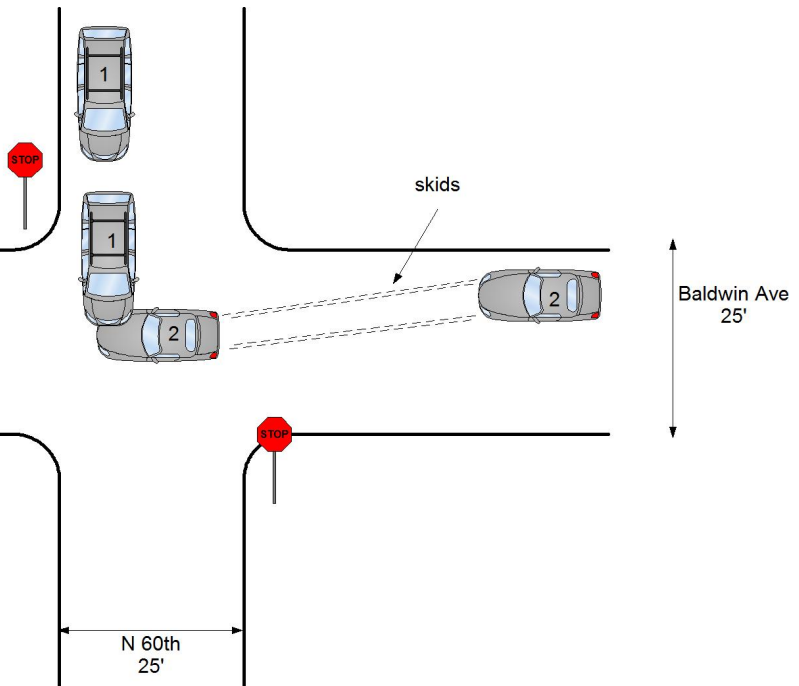


Approximate POI

5'8" E of W curb of N 60th  
17' N of S curb of Baldwin

Vehicle 2  
Skids from left tire 133'  
Skids from right tire 120'

*Not To Scale*



**DESCRIPTION OF ACCIDENT BASED ON OFFICER'S INVESTIGATION**

The driver of vehicle 1 reported that he was traveling southbound on N 60th in a van occupied by six other juveniles. He said that he stopped at the stop sign and didn't observe a vehicle coming and entered into the intersection and both vehicles collided. The driver of vehicle 1 thought that vehicle 2 was driving at a high rate of speed and this is why he didn't see him. The driver of vehicle 2 said that he was traveling westbound on Baldwin at approximately 35mph. He observed vehicle 1 traveling southbound on N 60th and said that he didn't see the vehicle completely stop so he began to brake, but was unable to stop in time to prevent the accident and both vehicles collided. There was approximately 133' of skid marks from vehicle 2 and it appears that he was traveling at a high rate of speed. The driver of vehicle 2 was cited/released for negligent driving and the driver of vehicle 1 was cited/released for failure to yield.

<b>PROPERTY</b>	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE \$
	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE \$
<b>WITNESSES</b>	NAME ADDRESS PHONE				
	NAME ADDRESS PHONE				

VEHICLE MOVEMENT BEFORE COLLISION				POINT OF IMPACT AND MOST DAMAGED AREA <i>(Enter numbers for each vehicle)</i>				AIRBAG DEPLOYED VEHICLE 1				RESTRAINT USE VEHICLE 1				TOTAL OCCUPANTS													
VEH NO.	N	S	E	W	ROAD OR HIGHWAY NAME		VEHICLE 1		VEHICLE 2		VEHICLE 1		VEHICLE 1		VEH 1		VEH 2												
1		X			N 60th Street		POINT OF IMPACT	01	POINT OF IMPACT	02	<div style="display: flex; justify-content: space-around;"> <span>4</span><span>5</span><span>5</span> </div>		<div style="display: flex; justify-content: space-around;"> <span>2</span><span>1</span><span>1</span> </div>		<div style="display: flex; justify-content: space-around;"> <span>7</span><span>1</span><span>1</span> </div>		<div style="display: flex; justify-content: space-around;"> <span>7</span><span>1</span><span>1</span> </div>												
2				X	Baldwin		POINT OF IMPACT	01	POINT OF IMPACT	02	<div style="display: flex; justify-content: space-around;"> <span>4</span><span>5</span><span>5</span> </div>		<div style="display: flex; justify-content: space-around;"> <span>2</span><span>1</span><span>1</span> </div>		<div style="display: flex; justify-content: space-around;"> <span>7</span><span>1</span><span>1</span> </div>		<div style="display: flex; justify-content: space-around;"> <span>7</span><span>1</span><span>1</span> </div>												
1	01	06 Turning left				MOST DAMAGED AREA	01	MOST DAMAGED AREA	02	<div style="display: flex; justify-content: space-around;"> <span>4</span><span>5</span><span>5</span> </div>		<div style="display: flex; justify-content: space-around;"> <span>2</span><span>1</span><span>1</span> </div>		<div style="display: flex; justify-content: space-around;"> <span>7</span><span>1</span><span>1</span> </div>		<div style="display: flex; justify-content: space-around;"> <span>7</span><span>1</span><span>1</span> </div>													
2	01	08 Entering traffic lane				MOST DAMAGED AREA	01	MOST DAMAGED AREA	02	<div style="display: flex; justify-content: space-around;"> <span>4</span><span>5</span><span>5</span> </div>		<div style="display: flex; justify-content: space-around;"> <span>2</span><span>1</span><span>1</span> </div>		<div style="display: flex; justify-content: space-around;"> <span>7</span><span>1</span><span>1</span> </div>		<div style="display: flex; justify-content: space-around;"> <span>7</span><span>1</span><span>1</span> </div>													
01 Essentially straight ahead 02 Backing 03 Changing lanes 04 Overtaking/ Passing 05 Turning right 06 Turning left 07 Making U-turn 08 Entering traffic lane 09 Leaving traffic lane 10 Parked 11 Slowing or stopped in traffic 12 Other 13 Unknown						00 None 01 Top & windows 02 Undercarriage 03 Total (all areas) 04 Other						1 Deployed - front 2 Deployed - side 3 Deployed - both front/side 4 Not deployed 5 Not applicable/ No airbag available 6 Unknown						1 None used - vehicle occupant 2 Lap & shoulder belt used 3 Shoulder belt only used 4 Lap belt only used 5 Child safety seat used 6 Child booster seat used 7 DOT approved helmet used 8 Costume helmet used 9 Restraint use unknown						ALCOHOL/ DRUGS SUSPECTED 1 Neither alcohol nor drugs suspected 2 Yes - alcohol suspected 3 Yes - drugs suspected 4 Yes - alcohol & drugs suspected 5 Unknown					

OFFICER NO. <b>1254</b>	TROOP/ TEAM/ BEAT <b>NW</b>	DEPARTMENT <b>Lincoln Police Department</b>	Photographs taken? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
INVESTIGATOR NAME (Print or Type) <b>Lynette Russell</b>		INVESTIGATOR SIGNATURE <b>Approved by Officer Lynette Russell</b>	
DATE OF REPORT <b>04/12/2016</b>			